

NEBRASKA GAMBLERS ASSISTANCE PROGRAM

2004 ANNUAL REPORT

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF BEHAVIORAL HEALTH SERVICES

**OFFICE OF MENTAL HEALTH, SUBSTANCE ABUSE
AND ADDICTION SERVICES**



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HISTORY OF THE PROGRAM

The Gamblers Assistance Program (GAP) was created in 1992 as part of the Nebraska Lottery Act. The GAP was originally administered by the Department of Revenue and subsequently transferred to the Division on Alcoholism, Drug Abuse and Addiction Services in 1995. The initial allocation for the program was 1% of 25% of lottery revenues, amounting to approximately \$250,000 annually.

The Act also created the Nebraska Advisory Commission on Compulsive Gambling (Commission). The Commission was made up of eleven members representing all areas of the state who were appointed by the Governor. The role of the Commission was to provide input and advice into planning and funding decisions made on the allocation of GAP funds. The Commission, in 1993, identified four primary goals for the program:

- 1) Training of counseling professionals to provide services to those affected by problem gambling;
- 2) Establish a statewide network of providers;
- 3) Provide instant access to services across the state, and
- 4) Insure provision of services.

These four goals have remained the primary focus of the program. Gamblers assistance is a new field, and these goals proved to be an enormous undertaking. Significant progress has been made toward achieving these goals in the relatively short period of time that the GAP has been in existence. In developing the services necessary to meet the primary goals noted above, contracts are awarded to agencies and individual providers in all areas of the state under two broad categories of services. These categories are: Training, Helpline and Public Awareness; and Outpatient Therapy/Community Outreach.

In 1996 the Legislature responded to increased demand for Gamblers Assistance Program services by appropriating an additional \$250,000 per year to the GAP from the Charitable Gaming Operations Fund. The Legislature also included intent language in an appropriations bill to increase

TESTIMONIALS

About two years ago I got into a recovery program for my alcoholism. I also needed to get into a gambling treatment program and thanks to the Gamblers Assistance Program I was able to get the help I needed.



I live off "disability" due to a mental condition, of which I think due to help like the counseling I am receiving for my addictions, and in particular, my gambling addiction, am hopeful that I can someday secure meaningful full-time work again and get off the "system".

the GAP allocation to one million dollars in future years should the need for additional services be demonstrated.

In FY2000 the Legislature increased annual funding from the lottery to \$500,000 plus 1% of 25% of the Lottery revenue, but reduced the amount from Charitable Gaming from \$250,000 to \$50,000. It is projected that GAP revenue from these sources will be \$750,000 for FY2005.

The Behavioral Health Reform Act (LB 1083) of 2004 has changed the structure of the GAP while retaining a majority of the funding and administrative responsibilities. Through the Behavioral Health Reform Act, the Nebraska Advisory Commission on Compulsive Gambling was eliminated and replaced by the State Advisory Committee on Problem Gambling and Addiction Services (Committee) as a component of the broader State Behavioral Health Council (Council) advisory group. The Committee has 12 Governor appointed members whereas the Commission had 11 members. Ten of the Committee members also serve on the Council. Please refer to Appendix A for a listing of the Committee members.

GAP REVENUE BY SOURCE

	Source of Funds	
	Charitable Gaming Operations Fund	Nebraska Lottery Revenue
Amount of Annual Allocation for FY04 and Beyond	\$50,000	\$500,000 + ~\$200,000 Total = \$700,000



I gave up getting my weekly bookie sheet, and got a very cordial letter back from one of the bookies saying that they agreed that I had a problem with gambling and was glad themselves that I was seeking help!! It was tough giving up the bookies, as I thought they were friends, but since have begun to make new friends at G.A. and also through the friendship developed through my counseling...

ADMINISTRATION

The GAP program currently operates within the Division of Behavioral Health (Division), Office of Mental Health, Substance Abuse & Addiction Services (OMHSAAS). Program staff consists of a .5 FTE program manager and a 1.0 FTE program specialist with staff support provided by the OMHSAAS. Please refer to Appendix B for GAP staff contact information.

Administrative functions of the GAP program personnel are centered on achieving the four major goals identified by the Commission. This involves:

- 1) Contracting with and monitoring agencies and individual providers of problem gambling treatment services to promote an effective and accessible statewide system of care;
- 2) Contracting for and monitoring the provision of training for counseling professionals;
- 3) Certification of counseling professionals who meet the requirements established by the OMHSAAS; and;
- 4) Contracting for and monitoring the operation of a 24/7 live answer helpline including related public awareness activities.

Counselor certification is also administered by GAP staff, with input from the Compulsive Gambling Counselor Certification Advisory Board. There are currently 18 Certified Compulsive Gambling Counselors (CCGC) with many more professionals at various stages in the certification process. Please refer to Appendix D for a listing of Advisory Board members and certified counselors.

In addition to the duties above, GAP staff are active in national efforts and benefit from the experiences in problem gambling efforts from around the world. Both the program manager and the program specialist participated in the development of a white paper for the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment (SAMHSA-CSAT) on the role single state authorities for substance abuse should play in the provision of problem



I was broke not only financial[ly] but mentally and emotional[ly]. I thought there was no hope for me. I had been gambling for ten years. I had been hospitalized in California and Oklahoma for depression due to gambling. In Oklahoma while I was in a treatment program, I began gambling again and was moved out of the halfway house to the streets. I managed after two months to get a job and obtain housing. I decided to move closer to my family in Kansas and get away from the casino. Well guess what, I found casino's in Kansas. I lost my job in Kansas and move[d] to Grand Island, NE in April 2003. I thought this was to be a new beginning, one more time.




gambling services. GAP staff serve on the board of directors for the National Council on Problem Gambling, the Institute for Problem Gambling and the National Problem Gambling Awareness Week planning committee.

In 2004 GAP staff played a major role in forging a network from the states of Iowa, Missouri, Kansas and Nebraska that successfully obtained a \$50,000 grant from SAMHSA - CSAT for the first annual Midwest Conference on Problem Gambling and Substance Abuse. Many of the presenters at the conference were GAP providers - a testament to Nebraska's leadership in the treatment of problem gamblers and development of services to address this emerging public health issue.

FY05 EXPENDITURES

Chart 1 on the following page depicts the expenditure of GAP funds for the 2004 state fiscal year. Total expenditures of GAP funds were \$725,467.38. Of this total, \$105,000 supported the Helpline, \$45,000 was expended on training of professionals, \$516,319.76 was paid to agency and individual providers of treatment services, and \$59,147.62 was allocated for the GAP's administrative costs.

Several agencies and individual providers exceeded the amount of service provision supported by their GAP contracts. They then provided non-reimbursed services to compulsive gamblers and/or their families. These services exceeded 550 hours of unbilled activity to the GAP in FY04 alone.



TESTIMONIALS

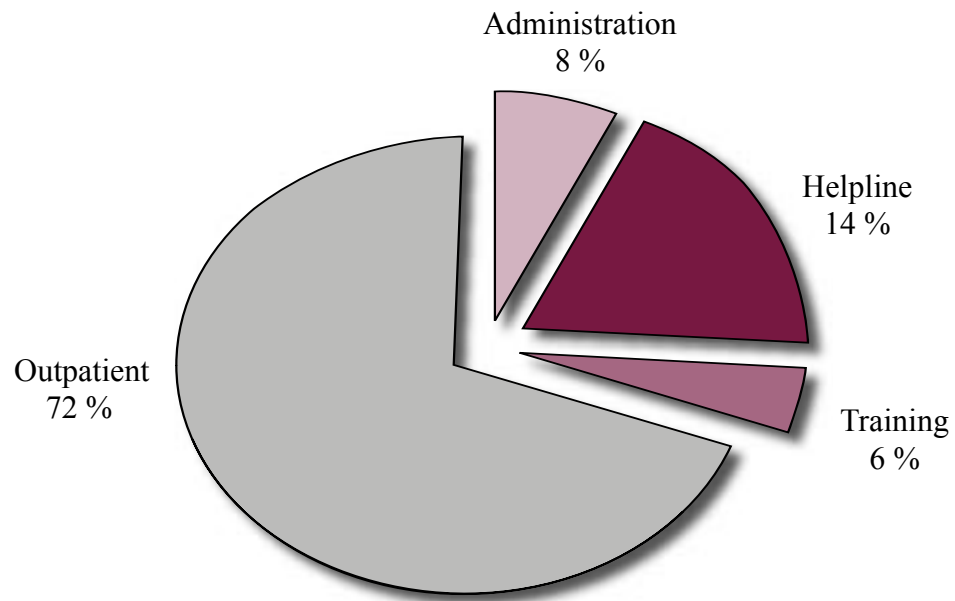
It lasted only one month and I spent 3 days at the boats in Council Bluffs. When I got back my family told me this was it. They were done!


I don't know where I would be today if I didn't have assistance from the Gambler's Assistance Program. I had a job but had a large debt load and no health insurance. If I had been turned away one more time I know I would not be here today.

It is not just existing but learning how to live on life's term, with serenity and peace. I will be forever grateful for the Nebraska Gamblers Assistance Program.

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CHART 1:
FY04 GAP EXPENDITURES





TESTIMONIALS

I am not making excuses but there are not a lot of therapists or assistance for the compulsive gamblers. I should know I moved from CA, OK, KS and finally found help in NE. My biggest problem was not having the funds to be able to take the time that I needed for recovery. Recovery is not a quick fix, it takes time and a lot of hard work. I hope that I can help just one other person to find the road to recovery. Thank you for saving my life.

FY04 SERVICES PROVIDED

TRAINING

The Nebraska Council on Compulsive Gambling (NCCG) is the contractor for statewide training of counseling professionals. The NCCG has been able to use national leaders in the gambling treatment field as trainers through its affiliation with the National Council on Program Gambling (NCPG). This affiliation remains strong and allows the NCCG to provide high quality training events that leverage the amount of funds available to them through the GAP.

As part of the 2nd Annual National Problem Gambling Awareness Week, the NCCG hosted a spring conference on problem gambling that was attended by over 100 professionals from six different states. For the second year in a row, Nebraska Governor Johanns opened the conference with encouraging remarks about the need for Nebraska to continue to address problem gambling issues.

In addition to the spring conference, 90 hours of training were provided to 126 professionals throughout the state. Providing counselors with the education required to attain certification and disseminating information on best practices in the problem gambling field remain high priorities. Future efforts will place greater emphasis on the development of a stable workforce in the western and rural areas of Nebraska.

HELPLINE

The NCCG also holds the contract for helpline services statewide. This service operates twenty-four hours per day, seven days per week. The primary focus of the helpline is to provide information, crisis intervention and referral services to individuals negatively impacted by gambling behaviors. The helpline has the capability of transferring callers directly to therapy providers in the caller's community at the caller's request. This capability is seen as "closing the gap" between persons in need of services and the services being provided.

TESTIMONIALS

Having gone through two 30 day in-patient treatment programs that had little lasting effect, I have come to realize the value of ongoing therapy for problem gamblers. There are many more out there like me who have not had an opportunity to discover how wonderful life can be free of the oppressive yoke of gambling addiction.



It is important that education and treatment of problem gamblers and their families be available through a facility with experienced counselors.

Nebraska is fortunate to be the second state in the country to utilize an intake process and database that is slated to be implemented nationwide in the near future. Through its affiliation with the National Council on Problem Gambling, the NCCG was able to pilot this process. When other states are up and running, Nebraska will have the capability to compare common data with other states' helplines. This will enable the GAP and the NCCG to develop needed services and target consumers with the information and assistance they need.


In FY04 the helpline handled 2,714 calls - an average of 226 per month. All areas of the state are affected by compulsive gambling, as evidenced by calls received on the helpline originating from every area of the state. Sixty-six percent (66%) of callers identified themselves as having gambling problems, while the remaining 34% were concerned about someone else's gambling behavior. A disturbing trend was an increase in the number of callers identifying the internet as a venue for their gambling behavior.

OUTPATIENT THERAPY

In FY04 outpatient therapy services were provided through contracts with four agency providers and agreements with 21 individual counselors. All six behavioral health regions were served through the contract and agreement process. Please refer to Appendix C for a listing of FY04 providers and their contact information.

GAP outpatient therapy programs served 820 unique individuals in FY04, a 210% increase over the past two fiscal years. Consumers receiving services had an average age of 41 years, with 53% being male, and 47% female. The most common length of service delivery was 75 days at an average cost of \$630 per consumer.

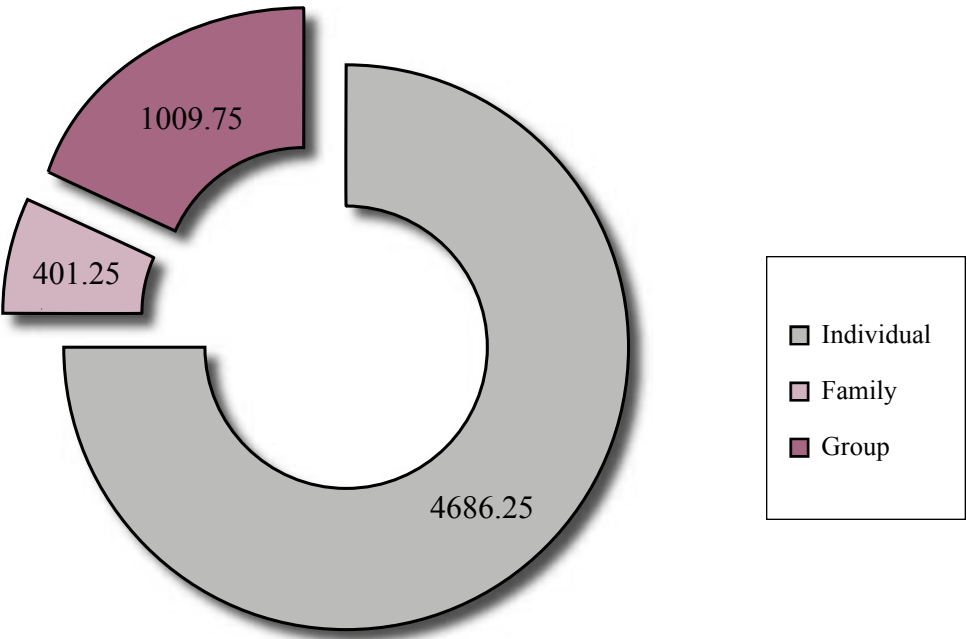
A total of 6,097.25 outpatient therapy units were provided. Chart 2 shows the breakout by type of therapy service provided. In addition to these services, 363 assessments were completed and 151 presentations to local communities were provided. At current funding levels, the GAP has maximized its ability to provide services and has, in fact, benefited from contract professionals providing in excess of 550 hours of non-reimbursed services to problem gamblers and their families.



TESTIMONIALS

We listened to six other people with gambling problems and learned from them that our loved one was not any different than other compulsive gamblers. Without [that], we would have been very naïve, uneducated and alone. [It] gave us a place to go to cope and talk about the problem. There is no other way to say it: they saved our family.

CHART 2:
FY04 OUTPATIENT THERAPY UNITS
BY TYPE OF SERVICE





TESTIMONIALS

Our state should have resources available to help those unable to help themselves, similar to cancer patients or anyone with a disease. The costs involved will be minimal compared to the loss of quality of life, should they not be funded.

❧

I had a very hard time with stopping gambling suffering several relapses the first year I was in treatment. [She] never gave up on me. She was always there when I would call and in fact she would go out of her way just to make sure I was going to be okay. I owe my life to her and the treatment center.

FY04 ACCOMPLISHMENTS

- Management of Midwest Conference on Problem Gambling and Substance Abuse. The conference convened August 11-13, 2004 in Kansas City, Missouri and welcomed a total of 172 registrants representing 15 different states. This conference was initiated and managed by GAP staff, and was the result of a collaborative effort of 14 distinct organizations from the host states of Nebraska, Iowa, Missouri and Kansas and a \$50,000 grant from SAMHSA. The intent of the conference was to provide the most current information on problem gambling and co-occurring substance abuse from the leading experts in the field.
- Participation in the 2nd Annual National Problem Gambling Awareness Week (NPGAW). This public awareness effort was also initiated by the GAP staff through partnerships with the Association of Problem Gambling Service Administrators and the National Council on Problem Gambling. This year the Oregon Lottery donated over \$100,000 in professional services to develop problem gambling awareness materials for public use. Materials can be obtained free of charge at www.npgaw.org.
- Inclusion in the training contract of a provision to provide scholarships and financial incentives to prospective problem gambling counselors in Behavioral Health Regions I & II to attend courses required for certification. This initiative is aimed at workforce development in the rural areas of the state.
- Development of a Request for Proposal process and a restructuring of current contracts for FY05. The restructuring of contracts will enable more efficient and effective use of available funds as well as maximizing service delivery with existing providers.
- Continued work with Magellan Behavioral Health on outpatient therapy data collection and reporting via the World Wide Web. Identified data needs to implement performance based contracting and began data collection to progress toward this goal.



I am now over a year clean from gambling and feeling stronger than I had for a very long time. I am getting my life back under control and my family is becoming more and more strong as well.



I am grateful for the services that they provide as well as for the timely information and material that they make available upon request.

- Participation in SAMHSA - CSAT White Paper development on the role of single state authorities on substance abuse in the provision of problem gambling services.
- Inclusion of gambling incidence and problem gambling indicator questions in the Risk and Protective Factor Survey of Nebraska youth. Results indicated 50% of Nebraska's youth have participated in gambling at or before age 10. Data also showed a significant difference between male and female participation in gambling and the likelihood of problem gambling. Males were more likely to report gambling and problem gambling issues by nearly 3:1 over their female counterparts. A copy of the full report can be obtained by contacting the Division of Behavioral Health.

FY05 GOALS AND ACTIVITIES

- Continue collaboration with Iowa, Kansas and Missouri on the 2005 Midwest Conference on Problem Gambling and Substance Abuse slated for August 24-26, 2005.
- Develop performance measures for outpatient therapy contracts. Implement process to report on these measures.
- Identify and disseminate GAP needs to move closer to a public health model of service delivery and system design.
- Move counselor certification data to License Information System software in cooperation with the Department of Regulation and Licensure to make information more accessible to the public.
- Identify and pursue potential sources of federal grant funds being made available for problem gambling services.



I would like to thank you for the help I am getting. You see, if it weren't for the gambler's assistance fund, I would still be in a heap of trouble financially and be a mess with my mental state of well-being.



The care I received far exceeds any care I have received in the past. I had been to numerous counselors with no success. What also impresses me is the time they commit to community outreach. They bring awareness to the issues of compulsive gambling and the effect it has on families. I am very grateful that they were there in my time of need.

APPENDIX A

STATE ADVISORY COMMITTEE ON PROBLEM GAMBLING AND ADDICTION SERVICES

Sherrie Geier, Chair** - Lincoln

John Atherton, Vice-Chairperson* - Omaha

Lynda Lakin, Secretary* - Omaha

Wayne Choat* - St. Edward

Janet French* - Omaha

Theo Hudson - Bellevue

Lisa Jones* - North Platte

Steve Jung* - Lincoln

Tom Nutt** - Holdrege

Kate Speck** - Lincoln

Dick Stalker* - Grand Island

Brenda Wagner - Lincoln

* Denotes election by the Committee to the State Behavioral Health Council

** Denotes gubernatorial appointment to the State Behavioral Health Council

APPENDIX B

RESOURCES FOR PROBLEM GAMBLING INFORMATION

NEBRASKA GAMBLERS ASSISTANCE PROGRAM

- Tim Christensen, Program Manager
tim.christensen@hhss.ne.gov
402-479-5574
- Gordon Tush, Program Specialist
gordon.tush@hhss.ne.gov
402-479-5579
<http://www.hhs.state.ne.us/beh/gam/gam.htm>

NEBRASKA COUNCIL ON COMPULSIVE GAMBLING

- Jerry Bauerkemper, Executive Director
Exnccgib@aol.com
402-292-0061
www.nebraskacouncil.com

NATIONAL COUNCIL ON PROBLEM GAMBLING

- Keith Whyte, Executive Director
Ncpg@ncpgambling.org
202-547-9204
www.ncpgambling.org

RESPONSIBLE GAMBLING COUNCIL OF ONTARIO

- Excellent resource for research on problem gambling issues. Catalog of research and helpful links from around the world. Updated regularly.
www.responsiblegambling.org

ASSOCIATION OF PROBLEM GAMBLING SERVICE ADMINISTRATORS

- Information on publicly funded programs in the United States.
www.apgsa.org

HARVARD MEDICAL SCHOOL - THE WAGER

- Sign up for weekly email summarizing latest gambling research written in lay terms
www.thewager.org

APPENDIX C

FY04 GAP PROVIDERS

Agency / Name	City	Contact Information
Lutheran Family Services ➤ Tom Youngquist	Scottsbluff	1712 Avenue B Scottsbluff, NE 68361 308-635-2535
Lutheran Family Services ➤ Sue Huebner ➤ Rebecca Nielsen	North Platte / McCook	120 East 12 th Street North Platte, NE 69101 308-532-0587
First Step Recovery & Wellness Center, Inc. ➤ Rick McNeese, Ph.D. ➤ Dawna Preitauer ➤ Thomas Booth	Lincoln	210 Gateway #342 Greentree Court Lincoln, NE 68510 402-434-2730
Heartland Family Service ➤ Harlan Vogel ➤ Konnie Kirchner	Omaha	2101 South 42 nd Omaha NE 68105 402-552-7402
Renew Counseling, P.C. ➤ Richard Landrigan	Scottsbluff	1014 Ave. I Scottsbluff, NE 69361 308-632-2525
Horizon Recovery Center ➤ Ron Felton ➤ Sharon DeNino ➤ Rebecca Green	Hastings	714 East Side Blvd. Hastings, NE 68901 402-462-2066
Choices Recovery Center ➤ Deb Hammond ➤ Wanda Swanson ➤ Annette Weber	Lincoln	924 Charleston Street Lincoln, NE 68508 402-476-2300

Spence Counseling Center ➤ Charles Spence ➤ Linda Zitek ➤ Anne Holmstrom	Omaha	11330 Q Street, #205 Omaha, NE 68137 402-597-2329
Riggins & Associates, Inc. ➤ Michelle Burger	Fremont	426 East 22 nd Street Fremont, NE 68025 402-721-8805
Independent Counseling Services ➤ Jean Hunt	Ainsworth	P.O. Box 5 Ainsworth, NE 69210 402-387-0395
Oasis Counseling International ➤ Betty Hampton	O'Neill	221 West Douglass O'Neill, NE 68763 402-379-2030
Mike Sullivan	Norfolk	P.O. Box 1815 Norfolk, NE 68702 402-750-6453
A Counseling Center, P.C. ➤ Kevin FitzMaurice	Omaha	3223 North 109 th Plaza Omaha, NE 68164 402-573-7277
Maplewood Counseling ➤ Stan Latta	Omaha	7521 Main Street, Suite 105 Omaha, NE 68127 402-399-9999
Addiction & Mental Health Counseling ➤ Rob Walton	Norfolk	125 South 4 th , Suite 212 Norfolk, NE 68701 402-841-3791

APPENDIX D

CERTIFIED COMPULSIVE GAMBLING COUNSELORS

PURPOSE

The Compulsive Gambling Counselor Certification Advisory Board (Board) meets semi-annually to review the applications for Certified Compulsive Gambling Counselor. The Board reviews applications for completeness and determines if the applicant meets the requirements of Title 201. The Board also meets to review issues of certification and to make recommendations to the Division for changes in the certification process/procedures. The administrator of the Office of Mental Health, Substance Abuse and Addiction Services appoints the members of the Board.

AUTHORITY

Authority for the Board can be found in Title 201 NAC Chapter 6, Section 1.

MEMBERSHIP

Name	Credentials	City
Michael Sullivan	LCSW, CCGC	Humphrey
David Hoppe	PLMHP, LADC	Omaha
Harlan Vogel	CPC, NCGC, CCGC	Omaha
Sue Huebner	LMHP, CCGC	North Platte
Cora Simmerman Berry	LMHP, CPC, LPC, LADC	McCook
Mary Howell	LMHP, LADC	Lincoln

Certified Compulsive Gambling Counselors - 11/2004

- Deb Hammond, Lincoln
- Harlan Vogel, Omaha
- Konnie Kirchner, Omaha
- Linda Zitek, Omaha
- Mike Sullivan, Norfolk
- Sue Huebner, North Platte
- Michelle Burger, Fremont
- Janelle Holt, Omaha
- Ed Lankas, Lincoln
- Tom Booth, Lincoln
- Wanda Swanson, Lincoln
- Betty Hampton, O'Neill
- Dawna Preitauer, Lincoln
- Lori Crowther, Lincoln
- Gina Fricke, Omaha
- Annette Weber, Lincoln
- Ron Felton, Hastings
- TJ Gorman, Council Bluffs

APPENDIX E

Nebraska Gamblers Assistance Program

Division of Behavioral Health Services
Office of Mental Health, Substance Abuse and Addiction Services
PO Box 98925
Lincoln Ne 68509-8925
402-479-5574
Fax 402-479-5162
tim.christensen@hhss.ne.gov
<http://www.hhs.state.ne.us/beh/gam/gam.htm>

MISSION STATEMENT

"To reduce the impact of problem gambling in Nebraska"

GOALS

1. Maintain a viable infrastructure of trained professionals to provide services to affected individuals.
2. Establish a statewide network of these providers.
3. Provide instant access to services throughout the state.
4. Insure provision of appropriate services.

STATISTICS

- Three percent (3%) of adults and 9% of adolescents in Nebraska experience gambling problems each year. This equals over 46,000 Nebraskans.
- Each untreated problem gambler generates a minimum of \$5,100 in social costs. Treatment costs average \$630 per individual in FY04.
- Contracts are held with 16 organizations and individuals to provide public awareness, helpline, training and outpatient services.
- Over 820 individuals utilized outpatient therapy services in FY04.

KEY STATE EMPLOYEES

Nancy Montanez, Director Department of Health and Human Services	Ron Sorensen, Administrator Office of Mental Health, Substance Abuse and Addiction Services
Tim Christensen, Program Manager Office of Mental Health, Substance Abuse and Addiction Services	Gordon Tush, Program Specialist Office of Mental Health, Substance Abuse and Addiction Services


■ *Advisory Committee on Problem Gambling and Addiction Services (See Appendix A)*

NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM



The Nebraska Health and Human Services System is committed to affirmative action/equal employment opportunity and does not discriminate in delivering benefits or services.



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